Filing Company: Pacific Life Insurance Company State Tracking Number:

Company Tracking Number:

TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.004 Modified Single Premium

Variable

Product Name: Endorsement

Project Name/Number: /

Filing at a Glance

Company: Pacific Life Insurance Company

Product Name: Endorsement SERFF Tr Num: PACL-128515889 State: Arkansas TOI: A02I Individual Annuities- Deferred Non-SERFF Status: Closed-Approved-State Tr Num:

Variable Closed

Sub-TOI: A02I.004 Modified Single Premium Co Tr Num: State Status: Approved-Closed

Reviewer(s): Linda Bird

Author: Craig Hopkins Disposition Date: 07/05/2012

Date Submitted: 06/26/2012 Disposition Status: Approved-

Closed

Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

Filing Type: Form

General Information

Project Name: Status of Filing in Domicile: Not Filed

Project Number: Date Approved in Domicile:

Requested Filing Mode: Domicile Status Comments: NE, our state of

domicile, is a part of the IIPRC.

Explanation for Combination/Other: Market Type: Individual Submission Type: Individual Market Type:

Overall Rate Impact: Filing Status Changed: 07/05/2012
State Status Changed: 07/05/2012

Deemer Date: Created By: Craig Hopkins

Submitted By: Craig Hopkins Corresponding Filing Tracking Number:

Filing Description:

FEIN: 95-079000

June 26, 2012 NAIC: 67466

To the Individual Life Insurance Department of:

Form Number Form Description 15-1247 Endorsement

Filing Company: Pacific Life Insurance Company State Tracking Number:

Company Tracking Number:

TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.004 Modified Single Premium

Variable

Product Name: Endorsement

Project Name/Number:

The form submitted is new and does not replace any previously approved form.

The Endorsement amends the Table of Guaranteed Values section by adding two illustrative tables to the contract to which it is attached. .

Once approved, the Endorsement will be provided to all future contract owners. This Endorsement will be issued with the following previously approved Contract forms:

Form Number Date Approved SERFF Tracking No. 30-1228 4/ /12 PACL-XXXXXXXX

Thank you for attention to this submission.

Should you have any guestions or require additional information, please call toll-free 1-800-722-2333 Ext. 3835.

Sincerely,

Craig M. Hopkins
Sr. Compliance Analyst
Product Compliance - RSD
Email: rcraig.hopkins@pacificlife.com
State Narrative:

Company and Contact

Filing Contact Information

Craig Hopkins, Sr. Compliance Analyst Craig.Hopkins@PacificLife.com

700 Newport Center Drive 949-219-3835 [Phone] Newport Beach , CA 92660 949-219-0579 [FAX]

Filing Company Information

Pacific Life Insurance Company CoCode: 67466 State of Domicile: Nebraska 700 Newport Center Drive Group Code: 709 Company Type: Annuities

Newport Beach, CA 92660-6397 Group Name: State ID Number:

Filing Company: Pacific Life Insurance Company State Tracking Number:

Company Tracking Number:

TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.004 Modified Single Premium

Variable

Product Name: Endorsement

Project Name/Number:

(800) 722-2333 ext. [Phone] FEIN Number: 95-1079000

Filing Fees

Fee Required? Yes Fee Amount: \$50.00

Retaliatory? No

Fee Explanation:

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

Pacific Life Insurance Company \$50.00 06/26/2012 60434691

Filing Company: Pacific Life Insurance Company State Tracking Number:

Company Tracking Number:

TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.004 Modified Single Premium

Variable

Product Name: Endorsement

Project Name/Number:

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved- Closed	Linda Bird	07/05/2012	07/05/2012

Filing Company: Pacific Life Insurance Company State Tracking Number:

Company Tracking Number:

TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.004 Modified Single Premium

Variable

Product Name: Endorsement

Project Name/Number: /

Disposition

Disposition Date: 07/05/2012

Implementation Date: Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

Filing Company: Pacific Life Insurance Company State Tracking Number:

Company Tracking Number:

TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.004 Modified Single Premium

Variable

Product Name: Endorsement

Project Name/Number:

Schedule	Schedule Item	Schedule Item Status Public Access
Supporting Document	Flesch Certification	Yes
Supporting Document	Application	No
Supporting Document	Life & Annuity - Acturial Memo	No
Supporting Document	SOV	Yes
Form	Endorsement	Yes

Filing Company: Pacific Life Insurance Company State Tracking Number:

Company Tracking Number:

TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.004 Modified Single Premium

Variable

Product Name: Endorsement

Project Name/Number: /

Form Schedule

Lead Form Number: 15-1247

Schedule Item	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
Status						
	15-1247	Policy/Cont Endorsement ract/Fratern al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		57.300	15-1247.pdf



Pacific Life Insurance Company [700 Newport Center Drive Newport Beach, CA 92660] A Stock Company

ENDORSEMENT TO AMEND TABLES OF GUARANTEED VALUES

Pacific Life Insurance Company has issued this Endorsement as a part of the annuity Contract to which it is attached.

All provisions of the Contract that do not conflict with this Endorsement apply to this Endorsement. In the event of any conflict between the provisions of this Endorsement and the provisions of the Contract, the provisions of this Endorsement shall prevail over the provisions of the Contract.

This Endorsement amends the Tables of Guaranteed Values section of the Contract to which it is attached.

TABLE OF GUARANTEED VALUES – ILLUSTRATION 1

The values shown below assume that the Purchase Payment of \$10,000 is paid on the Contract Date and allocated to a Guarantee Term of 7 years with interest accumulated at the minimum guaranteed rate of 1% per year. The values further assume that no withdrawals have been made, no premium taxes paid and that the Contract Value renews for 1 year periods after the Initial Guarantee Term.

The Contract Value for end of Contract Years 1 through 7 reflects the waiver of withdrawal charges on amounts up to the Free Withdrawal amount. The Free Withdrawal amount in Contract Year 1 is 10% of total Purchase Payments less total withdrawals. The Free Withdrawal amount after Contract Year 1 is 10% of the previous Contract Year's ending Contract Value. The full withdrawal value will never be less than total Purchase Payments paid less total withdrawals taken, less prior withdrawal charges.

We may credit an annual interest rate during a Guarantee Term that is higher than the Minimum Guaranteed Interest Rate.

End of		
Contract Year	Contract Value	Full Withdrawal Value
1	\$10,100.00	\$10,000.00
2	10,201.00	10,000.00
3	10,303.01	10,000.00
4	10,406.04	10,000.00
5	10,510.01	10,036.62
6	10,615.20	10,232.63
7	10,721.35	10,431.56
8	10,828.56	10,828.56
9	10.936.85	10.936.85
10	11,046.22	11,046.22
11	11,156.68	11,156.68
12	11,268.25	11,268.25
13	11,380.93	11,380.93
14	11,494.74	11,494.74
15	11,609.69	11,609.69
16	11,725.79	11,725.79
17	11,843.05	11,843.05
18	11,961.48	11,961.48
19	12,081.09	12,081.09
20	12,201.90	12,201.90

15-1247 1

TABLE OF GUARANTEED VALUES – ILLUSTRATION 2

The values shown below assume that the Purchase Payment of \$10,000 is paid on the Contract Date and allocated to a Guarantee Term of 5 years with interest accumulated at the minimum guaranteed rate of 1% per year.. The values further assume that no withdrawals have been made, no premium taxes paid and that the Contract Value renews for 1 year periods after the Initial Guarantee Term.

The Contract Value for end of Contract Years 1 through 5 reflects the waiver of withdrawal charges on amounts up to the Free Withdrawal amount. The Free Withdrawal amount in Contract Year 1 is 10% of total Purchase Payments less total withdrawals. The Free Withdrawal amount after Contract Year 1 is 10% of the previous Contract Year's ending Contract Value. The full withdrawal value will never be less than total Purchase Payments paid less total withdrawals taken, less prior withdrawal charges.

We may credit an annual interest rate during a Guarantee Term that is higher than the Minimum Guaranteed Interest Rate.

End of		
Contract Year	Contract Value	Full Withdrawal Value
1	\$10,100.00	\$10,000.00
2	10,201.00	10,000.00
3	10,303.01	10,000.00
4	10,406.04	10,000.00
5	10,510.01	10,131.32
6	10,615.20	10,615.20
7	10,721.35	10,721.35
8	10,828.56	10,828.56
9	10.936.85	10.936.85
10	11,046.22	11,046.22
11	11,156.68	11,156.68
12	11,268.25	11,268.25
13	11,380.93	11,380.93
14	11,494.74	11,494.74
15	11,609.69	11,609.69
16	11,725.79	11,725.79
17	11,843.05	11,843.05
18	11,961.48	11,961.48
19	12,081.09	12,081.09
20	12,201.90	12,201.90

.All other terms and conditions of your Contract remain unchanged by this Endorsement.

PACIFIC LIFE INSURANCE COMPANY

Chairman and Chief Executive Officer

[

Secretary]

Jane M. Guon

15-1247 2

Filing Company: Pacific Life Insurance Company State Tracking Number:

Company Tracking Number:

TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.004 Modified Single Premium

Variable

Product Name: Endorsement

Project Name/Number:

Supporting Document Schedules

Item Status: Status

Date:

Satisfied - Item: Flesch Certification

Comments: Attachment:

15-1247 Arkansas-certs.pdf

Item Status: Status

Date:

Bypassed - Item: Application

Bypass Reason: This is an Endorsement only filing

Comments:

Item Status: Status

Date:

Bypassed - Item: Life & Annuity - Acturial Memo

Bypass Reason: This is an Endorsement only filing

Comments:

Item Status: Status

Date:

Satisfied - Item: SOV

Comments: Attachment:

15-1247SOV.pdf

700 Newport Center Drive • Newport Beach, CA 92660

STATE OF ARKANSAS

CERTIFICATION OF READABILITY

This is to certify that the form(s) submitted herewith achieved the following reading ease score(s) as calculated by the Flesh Reading Ease Test and complies with the requirements of Arkansas State Ann. 66-3251 through 66-3258, cited as the Life and Disability Insurance Policy Simplification Act.

Form Number	Score
15-1247	53.7

Marcy Hill
Company Officer
Nancy A. Hill Name
Assistant Vice President, Compliance
Title
6/26/12
Date

700 Newport Center Drive • Newport Beach, CA 92660

STATE OF ARKANSAS

RULE AND REGULATION 6 CERTIFICATION

I, Nancy A. Hill, hereby provide our assurance that Rule and Regulation 6 has been reviewed and the above form(s) are in compliance said Rule and Regulation 6 as well as all other applicable requirements of the Arkansas Department of Insurance.
Marcyta Hice
Company Officer

Form Description

Endorsement

Form Numbers

15-1247

Nancy A. Hill Name

Title

6/26/12 Date

Assistant Vice President Compliance

700 Newport Center Drive • Newport Beach, CA 92660

STATE OF ARKANSAS

REGULATION 19 CERTIFICATION

Form Description

Endorsement

Form Numbers

15-1247

2/1/12 Date

I, Nancy A. Hill, hereby certify that the above form(s) meet the provisions of Regulation 19 as well as all applicable requirements of the Arkansas Department of Insurance.
Marcyth Hill
Company Officer
Nancy A. Hill
Name
Assistant Vice President Compliance
Title

700 Newport Center Drive • Newport Beach, CA 92660

STATE OF ARKANSAS

CERTIFICATION OF COMPLIANCE

We hereby certify that this form is in compliance with Ronnorfeiture. In no case shall the reserves, under the Values provided for under the policy contract.	
Jonatha Wallentin	
Company Officer	
Jonathan Wallentine, FSA, MAAA	<u>.</u>
Name	
Director of Product Pricing	_
Title	
6/26/12	_
Date	

RE: 15-1247

700 Newport Center Drive • Newport Beach, CA 92660

STATEMENT OF VARIABILITY

Form Number Form Description

15-1247 Endorsement

This Statement of Variability identifies and explains the variable items, denoted by brackets, contained in the above referenced variable annuity forms. Any changes within these areas will be administered in accordance with the requirements in your state, including any requirements for prior approval of a change.

Endorsement Form No. 15-1247

Bracketed (Variable) Text	Explanation of Variability
Company address & phone number	Current information shown. In the event of a change in the company address and/or phone number, the new information will be sown.
Officer's Signatures & Titles	Current signatures and titles shown. In the event of a change in company officers, the new officer's signature and title will be shown.

Except as otherwise described above, no other bracketed material appears within the endorsement.